



**JUSTICE CABINET
DEPARTMENT OF
JUVENILE JUSTICE
POLICY AND PROCEDURES**

REFERENCES:
505 KAR 1:120
3-JTS-4C-48—50
3-JDF-46—48
3-JCRF-4C-28, 29
1-JBC-4C-44—46
NCCHC Y-H-01, Y-H-02, Y-H-04
thru Y-H-06

CHAPTER: Health and Safety Services	AUTHORITY: KRS 15A.065
SUBJECT: Medical Records	
POLICY NUMBER: DJJ 403	
TOTAL PAGES: 3	
EFFECTIVE DATE: 4/4/2014	
APPROVAL: A. Hasan Davis	, COMMISSIONER

I. POLICY

A confidential Medical Record shall be maintained for each youth and shall be available to, and used for documentation by, all facility health care practitioners in each clinical encounter with youth.

II. APPLICABILITY

This policy shall apply to group homes and youth development centers and shall govern the actions of detention centers in complying with DJJPP Chapter 7 (Medical Records).

LIMITED APPLICABILITY

In day treatment centers, medical attention administered to youth (e.g. first aid, referrals for health care) shall be documented in the Progress Notes in accordance with DJJPP 329 for inclusion in the youth's Individual Client Record. Security and confidentiality of information shall be maintained in accordance with DJJPP Chapter 1 and Chapter 3 (Employee Code of Ethics and Individual Records).

III. DEFINITIONS

Refer to Chapter 400.\

IV. PROCEDURES

- A. Group homes and youth development centers shall maintain a health record for each youth in accordance with protocol approved by the Medical Director.
- B. The Medical Record shall be maintained separately from the youth's Individual Client Record while at the program. The Registered Nurse or, in programs without a full-time Registered Nurse, a health-trained designee shall be responsible for the maintenance of the Medical Record.

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- C. The Medical Record shall be marked as confidential, and secured unless in use. Confidentiality shall be maintained in accordance with DJJPP 102. Information in the Medical Record shall not be released to any person unless a release signed by the youth and guardian states specifically that medical information may be released. Mental health information shall not be released to any person unless a release signed by the youth and guardian specifically states that mental health information may be released.
- D. Access to Medical Records shall be available only to the facility Nurse Shift Program Supervisor (NSPS); RN, L.P.N.; qualified health professional; qualified mental health professional; psychiatrist; Regional Psychologist; Superintendent; Medical Director; Nurse Administrator; Chief of Mental Health Services; designated staff of the Quality Assurance Branch; and NCCHC and ACA standards compliance auditors. Specifically requested data shall be made available to the Department of Public Advocacy personnel.
- E. DJJ programs shall develop procedures which insure availability of Medical Records for review and for documentation to its health care providers, including the psychologist and the psychiatrist.
- F. A medical summary shall accompany youth to off-site health care providers or when released from the facility.
- G. Mental health notes shall be maintained with the Medical Record. A copy of the note may be made and placed in the Individual Client Record with appropriate blocking out of medical information.
- H. Transfer of Medical Records and information to agencies outside DJJ shall require written authorization by the youth, and parent or guardian.
- I. If a youth is transferred or stepped down from a DJJ program to another DJJ program, the youth's original Medical Record shall be transferred with the youth. A transfer summary, including documentation, and a minimum of three (3) business days supply of any required medication(s) shall accompany the youth to the receiving facility. When a juvenile is transferred, the following is required:
 - 1. Confidentiality of health record shall be maintained;
 - 2. Medically sensitive conditions and specific precautions to be taken by transportation officers shall be addressed and documented prior to transport; and,
 - 3. Written instructions regarding medication and health interventions required in route shall be provided to transporting officers and shall be separate from medical records.
- J. If the transfer or step down is to a non-state operated program, that program shall receive a copy of health data, if requested, and only after appropriate Release of Medical Information authorization has been received.
- K. Medical Records shall be transferred in a sealed envelope.

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- L. Upon discharge, a discharge summary shall be forwarded to the Juvenile Service Worker and a copy forwarded to the parent. If the youth is eighteen (18) years of age or older, the youth shall be provided a copy of a discharge summary. A copy shall be maintained in the Medical Record.
- M. Upon discharge from any DJJ program, any youth requiring medication or continuation of medical treatment shall have this information conveyed to his aftercare provider via a discharge summary. The provision of at least three (3) business days supply of any required medication(s) shall be documented in the discharge summary.
- N. Upon discharge of a youth from a DJJ program, the Registered Nurse shall review the Medical Record for completion of documentation and signatures. Any incomplete documentation shall be completed if possible and a late entry shall be included and identified when applicable.
- O. Original Medical Records shall be maintained at the program and disposed of according to the Kentucky Department for Libraries and Archives Record Retention Schedule or any revisions thereafter. Retained Medical Records shall be identified as confidential.
- P. If a youth returns to a DJJ program, the Medical Record shall be re-activated.

V. MONITORING MECHANISM

Monitoring shall be accomplished by the Superintendent or designee, the Registered Nurse, Quality Assurance Branch, the Medical Director or designee, and the Chief of Mental Health Services or designee.